



## City of Hiram

### Background Application Questionnaire

**Applicant's Name**

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**Last**

**First**

**Middle**

This employment application is not an offer of employment or a contract for employment. The completion of this application does not constitute an agreement, or promise to hire the applicant.

This employment application is the basis for the employment screening process and background investigation conducted by the City of Hiram and the Hiram Police Department on each applicant for a position of employment. The answers that you provide for each question on this application must be full and complete and completed in black ink by the applicant. Any information that is erroneous in nature or not provided on this application, whether intentional or unintentional, will constitute the basis for your elimination from consideration for the employment you now seek. Additionally, should you become employed with the City of Hiram, and at any time subsequent to your employment, fraudulent, misleading, or information missing from this application is discovered, your employment will be terminated. Please be sure that you carefully consider each and every question asked of you by this application and that you provide honest and complete information. If the question does not apply to you put "N/A" for the answer to that particular question. Any answer which requires more space than provided may be answered on the reverse side of the page, with the question number indicated beside the information. Incomplete applications will not be accepted.

I understand that if I do not wish to answer a question in this booklet, I may choose not to do so and my application will be terminated.

I have read and understand the above statement.

Signature of applicant: \_\_\_\_\_

Date signed: \_\_\_\_\_

## City of Hiram

### Authorization to Release Information

I, \_\_\_\_\_, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agency of the City of Hiram, or to any authorized agent of a criminal justice agency or any private agency upon request of the City of Hiram Police Department, whether the said records are of public, private or confidential nature. I direct release of such records regardless of any agreement I may have made previously to the contrary. The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions, financial or credit institutions, including records of loans, the records of commercial or retail credit agencies (including credit reports and/or ratings); and other financial statements and records wherever filed; medical and psychiatric treatment and/or consultations including hospitals, clinics, private practitioners, and the U.S. Veteran's Administration; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me and the records and recollections of attorney's at law or of other counsel whether representing me or another person in my case, wither criminal or civil, in which I presently have or have had an interest.

I understand that any information obtained by personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization, will be considered in determining my suitability for employment by the City of Hiram. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability for damages of whatever kind or nature which may at any time result to me on account of compliance on any attempts to comply with this authorization.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

\_\_\_\_\_  
Applicants Signature (including maiden name)

\_\_\_\_\_  
Date signed

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Complete Address

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date Witnessed

\_\_\_\_\_  
Telephone Number (include area code)

**City of Hiram**

**Consent Form**

I hereby authorize the City of Hiram and the Hiram Police Department to receive any Criminal/Drivers History record information pertaining to me which may be in the files of any Criminal Justice Agency of any state, or any local criminal justice agency in the State of Georgia.

Applicant's Name Printed \_\_\_\_\_  
Last First Middle

Applicant's Address \_\_\_\_\_  
\_\_\_\_\_

Sex \_\_\_\_\_ Race \_\_\_\_\_ DOB \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Drivers License Number \_\_\_\_\_ State \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

Sworn to and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Notary Public, Georgia, State at Large

## City of Hiram

### Drug and Alcohol Testing Consent Form

I, \_\_\_\_\_, do hereby authorize and consent to removal of bodily fluids (i.e., blood, urine, etc.) for the purpose of determining alcohol or drug content as part of the pre-employment process with the City of Hiram. Also, by signing this form, I do hereby consent to further drug/alcohol testing, random or otherwise, solely at the City's discretion.

\_\_\_\_\_  
(Print) FULL NAME

\_\_\_\_\_  
NOTARY

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Sex

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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[illegible]

**City of Hiram**

**Personal History Statement (cont.)**

Marital Status: (circle one)

Spouse Deceased      Divorced      Single  
Separated              Married

Present Spouse Information:

Name: \_\_\_\_\_  
                    First                      Middle                      Last                      Maiden

Date of Birth: \_\_\_\_\_

Place of Birth (city/state): \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Marriage: \_\_\_\_\_

County/State of Marriage: \_\_\_\_\_

Occupation/Employer: \_\_\_\_\_

List below every child born to you, adopted by you, and any step children, or children supported by you:

Name	Age	Where resides
_____		
_____		
_____		

Previous Marriage Information:

Ex-Spouse's Name: \_\_\_\_\_

Cause for no longer being married: \_\_\_\_\_  
(Divorced, Deceased, Etc.)

Ex-Spouse's Name: \_\_\_\_\_

Cause for no longer being married: \_\_\_\_\_  
(Divorced, Deceased, Etc.)

## City of Hiram

### Personal History Statement

List four (4) individuals who have knowledge of you and your qualifications, exclude relatives and former employers.

Name	Address	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you have a current Georgia Drivers License? Yes \_\_\_\_\_ No \_\_\_\_\_

Current Drivers License Number: \_\_\_\_\_

State: \_\_\_\_\_ Expires: \_\_\_\_\_

List any past Drivers License information:

License Number	State
_____	_____
_____	_____
_____	_____

Have you ever had a drivers license suspended, revoked, or refused? Yes \_\_\_\_\_ No \_\_\_\_\_

If "YES", explain: \_\_\_\_\_

List all traffic citations within the last seven (7) years.

Type of Violation	City/County/State	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you have liability insurance at the present time? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**City of Hiram**  
**Employment History**

How did you find out about this position: \_\_\_\_\_

Did a supervisor ever reprimand you for misconduct or not doing your job?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

If "YES", explain: \_\_\_\_\_

Did a supervisor ever reprimand you for being late or for being absent?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

If "YES", explain: \_\_\_\_\_

Please list all jobs you have had in the past fifteen (15) years including Military Service. List the most current employer first: (Use additional sheets if necessary, but use the following format)

Name of Employer: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_



**City of Hiram**

**Employment History (Cont.)**

Name of Employer: \_\_\_\_\_  
Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_  
Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Would any problem result if your present employer were contacted during the background investigation? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Have you ever been fired or asked to resign from any place of employment? Yes: \_\_\_\_\_  
No: \_\_\_\_\_.

If "YES", explain: \_\_\_\_\_

Have you ever served in the United States Military? Yes: \_\_\_\_\_ No: \_\_\_\_\_.

Branch: \_\_\_\_\_ Service Number: \_\_\_\_\_

Dates From: \_\_\_\_\_ To: \_\_\_\_\_

Job duties: \_\_\_\_\_

Type of Discharge: \_\_\_\_\_

Were you ever court-martialed, tried on charges, or the subject of company punishment, or any other disciplinary action while a member of the Armed Forces? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If "YES", Explain: \_\_\_\_\_

\_\_\_\_\_

Are you currently a member of the National Guard or any reserve unit? Yes \_\_\_\_\_ No \_\_\_\_\_.

If "YES", List: \_\_\_\_\_

\_\_\_\_\_

## City of Hiram

### Criminal Activity

Have you ever been detained, arrested, or convicted for any criminal offense? (Include juvenile offenses) Yes \_\_\_\_\_ No \_\_\_\_\_

Date	Charge	Agency	Circumstances
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever been arrested for or convicted of a felony crime?

Yes: \_\_\_\_\_ No: \_\_\_\_\_. If "YES", explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have gambling debts? Yes: \_\_\_\_\_ No: \_\_\_\_\_.

If "YES", explain: \_\_\_\_\_

Have you ever committed or been involved in a serious or undetected crime? Yes: \_\_\_\_\_

No: \_\_\_\_\_ (**NOTE:** the last page of this application denotes those offenses in the Georgia Criminal Code which we consider serious offenses. Please read this list prior to responding).

Have you ever been placed on probation or parole? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If "YES", explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever illegally sold, possessed, or delivered illegal drugs or marijuana? Yes: \_\_\_\_\_

No: \_\_\_\_\_

Have you ever tried or used marijuana, or any other drugs, illegally?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

If "YES", under what circumstances: \_\_\_\_\_

\_\_\_\_\_

Do you drink alcoholic beverages? Yes: \_\_\_\_\_ No: \_\_\_\_\_.

**City of Hiram**

**Record of Education**

List the name and address of the Schools attended:

**Name and Address    Course of Study    Dates Attended**

**Elementary School**

_____	_____
_____	_____
_____	_____

**High School**

_____	_____
_____	_____
_____	_____

**College**

_____	_____
_____	_____
_____	_____

**College**

_____	_____
_____	_____
_____	_____

**College**

_____	_____
_____	_____
_____	_____

**Other (Specify)**

_____	_____
_____	_____
_____	_____

**City of Hiram**

**Other**

Do you have any specialized skills that may be beneficial to this department? (i.e., water system operations, backhoe, uniloaders, etc.) Yes: \_\_\_\_\_ No: \_\_\_\_\_.

If "YES", explain: \_\_\_\_\_  
\_\_\_\_\_

Are you related to any person who is employed by the City of Hiram? Yes: \_\_\_\_\_ No: \_\_\_\_\_.

If "YES", who is the relative and what is your relation to this individual?

\_\_\_\_\_  
\_\_\_\_\_

Are you legally eligible for employment in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_. ( If yes, verification will be required upon employment)

Are you of legal age to work? \_\_\_\_\_ (operating heavy equipment, at least 18 years of age)

If your application is considered favorably, on what date will you be available for work?

\_\_\_\_\_

# City of Hiram

Write a short summary on why you are seeking this position with the City of Hiram. If more space is needed, use the back of this page.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**City of Hiram**

Do you understand that you will be required to conform to a strict dress code which does include such items as hair length and personal hygiene, and clothing requirements? \_\_\_\_\_. If offered a position, are you willing to conform to the dress code? \_\_\_\_\_.

Do you have any objection to working “on-call” shifts, and emergency “call-ins,” on nights, weekends, or holidays? \_\_\_\_\_

## City of Hiram

Your interest in employment with the City of Hiram is greatly appreciated. In order to properly process your background investigation, a photocopy of the following documents, when applicable, will be needed when you turn in this background investigation booklet. No booklet will be accepted without this information. Place a check mark beside the information you have enclosed with the booklet.

\_\_\_\_\_ Social Security Card  
\_\_\_\_\_ Valid Georgia Drivers License  
\_\_\_\_\_ Naturalization Card  
\_\_\_\_\_ Military DD-214 (Long form)  
\_\_\_\_\_ Military Discharge Certificate

Should you have any questions concerning the background investigation booklet or obtaining copies of the above listed documents, contact Terri Holley or Joseph Palmer at the City of Hiram City Hall at (770)943-3726. When you have completed the background investigation booklet and made copies of the above listed documents, return the entire booklet and forms to Terri Holley or Joseph Palmer. The application **WILL NOT** be accepted without all the proper documentation attached. **Background packet must be returned within 7 days.** The applications can either be returned in person to the Hiram City Hall or mailed to the following address:

City of Hiram  
217 Main Street  
Hiram, GA 30141  
Attn: Terri Holley or Joseph Palmer